

## **HOW TO WRITE A COMPARE/CONTRAST ESSAY**

Compare and contrast essays will follow a specific question and are fairly easy to complete. There are several ways to write this type of essay. The most important thing to remember is structure. Many wonderful essays fall victim to the problems of bad structure, making any ingenuity to fall by the wayside. Go over the rules on how to write a general essay, and then structure your compare/contrast essay in one of the following two main formats:

### **FORMAT 1:**

#### **1. Introduction**

Your introduction should open generally with a quotation, anecdote or generalisation, and lead into the thesis statement.

#### **2. Topic 1**

This next portion of your essay (which may consist of one paragraph or several) should cover only the first topic of the comparison and contrast essay. Compare/Contrast essays take two topics and illustrate how they are similar and dissimilar. Do not mention topic 2 in this first section.

#### **3. Topic 2**

This next portion of your essay (which may also consist of one or more paragraphs) should cover the second of the two topics. Do not discuss Topic 1 in this section. Since you have already gone into great detail about it, you may allude to Topic 1 briefly; however, do not analyse Topic 1 in this section. This portion of the paper is to discuss Topic 2 in great detail.

#### **4. Topics 1 and 2 Together**

Now that you have analysed both Topic 1 and Topic 2 independently, now it is time to analyse them together. This section may also be one or several paragraphs.

#### **5. Conclusion**

The conclusion –like the introduction– should be a generalisation of the thesis. This paragraph should express your certainty and absolute knowledge on the subject matter. You should reaffirm your thesis (essentially restate it in new words) and show how you've proven it.

## **FORMAT 2:**

### **1. Introduction**

Your introduction should open generally with a quotation, anecdote, or generalisation, and lead into the thesis statement.

### **2. All Comparisons (Topics 1 and 2)**

This section—which should consist of several paragraphs—should go through all similarities you find in the two topics on which you are writing. There should be at least three comparisons (essentially three short body paragraphs) in which you give an example from both topics of comparisons in each.

### **3. All Contrasts (Topics 1 and 2)**

This section—which should consist of several paragraphs—should go through all differences you find in the two topics on which you are writing. There should be at least three contrasts (essentially three short body paragraphs) in which you give an example from both topics of comparisons in each.

### **4. Conclusion**

This conclusion is wrapping up everything you have just proven in your paper. It should restate the thesis in a new, more official way, and you should feel quite confident in your writing.

### **SAMPLE:**

#### ***Compare and Contrast Two Counseling Theories: Client-Centered Approach and Cognitive Behavioral Therapy***

Modern-day psychology is equipped with a wide variety of therapies, techniques and approaches based on different models and theories of human behavior and development. When it comes to counseling, it is useful to be armed with a selection of tools, so that a counselor's professional arsenal allows them to be flexible and to apply different techniques based on the individual problems and situational needs of each client. But when it comes to most of the counseling models that a practitioner decides to set as the foundation of their work, both client-centered approaches and cognitive behavioral therapy are equally popular and widespread. Nevertheless, these theories are different, and their effectiveness comes from cardinally opposite sides of counseling.

The client-centered model, also sometimes referred to as person-centered, was developed by Carl Rogers around the middle of the twentieth century. Its main focus, as can be guessed from the name of the model, revolves around the clients themselves. Roger believed that it was the clients who knew the best way of dealing with their own problems, and by listening to the words of the clients during a consultation session, by reflecting their words and being emphatic, the therapist can help in the most effective way. Roger believed it to be important that the therapist try to understand the client in the best way, and constantly check whether their understanding and interpretation of the client's words is the right one. The client-centered approach is also much about respecting the clients and their freedom to express themselves in the most comfortable way, while constantly showing regard, and tolerance, to encourage such free expressions. This model is a bright example of a non-directive approach: meaning that the therapist does not deliberately steer the client, or provoke them, to be more emotional.

Cognitive behavioral therapy, on the contrary, uses directive consulting tools to control and guide, such as: asking questions; making interpretations; and directing client's attention and emotional exertions. Some psychologists believe that cognitive behavioral therapy is rather manipulative, especially when compared to the client-centered model. However, this may be rather a surface judgement. Cognitive behavioral therapy has two components to it: cognitive therapies and behavioral therapies. Cognitive therapy is about how clients interpret the world around them, the environment and situations with which they are faced, and how these cognitive interpretations shape their emotional states and responses. Essentially, cognitive therapy focuses on thinking. It analyzes how, and why, the client thinks a certain way, and aims at changing these patterns to form positive, nurturing, emotional states that can replace the current state of disharmony that the client is facing. Behavioral therapy is, in a way, the next stage. It focuses on actions rather than thoughts, and equips the therapist with effective tools to form new behavioral patterns for a client by stimulating certain positive "rewards"

(emotional, such as praise and encouragement), for the positive changes in behavior that the client demonstrates when encountering a certain problem.

When comparing the two models, it may seem that the role of the therapist is a lot less important in the client-centered model than in the cognitive behavioral therapy. However, this impression is far from being true. In fact, the client-centered approach is much about how the therapist encourages the client to open up by showing congruence. Being congruent means being self-aware, self-accepting, and having no mask between oneself and the client (Janon 28). The therapist is to be as honest and natural as possible, while showing sincere empathy, and nurturing the client's inner capacity towards healing. Being appreciative of the honesty and hard work that the client is demonstrating, from session-to-session, will eventually bring fruitful results. However, this may take time, and when using the client-centered model, the therapist should be prepared that counselling may be rather prolonged.

Cognitive behavioral therapy, on the contrary, is usually used as a short-term treatment method. By actively engaging in the dialogue with the client and encouraging the client to develop a challenging attitude towards their own thoughts and feelings, even giving homework assignments and asking the client to keep a diary, the cognitive behavioral approach usually allows one to quickly see positive improvement, and gradually progress towards the desired goal. Cognitive behavioral therapy is also more structured and goal-oriented, and it allows the client and the therapist to work together towards the specific set aims, step-by-step (Norman 201). Tracking progress towards goals, throughout the course of treatment allows one to fairly evaluate the success of the sessions, as well serving as an additional motivating factor for the client to believe in the reality of positive changes by putting checkmarks next to each of the small achievements.

Without close examination, the two models of counselling may seem like completely contrary methods. It is in fact true that there are a lot of differences between the two approaches, and it can clearly be seen through the above analysis. Nevertheless, the main foundations for both kinds of therapy are similar. They both concentrate on forming a mutual understanding and a cooperative atmosphere between the therapist and the client, while assuring the latter that it is the clients themselves who are the best experts on their own issues. Both models allow the client to actively participate in the process of healing, and in the case of the client-centered model, to even take the leading and controlling role in this process. For all these reasons, I believe it is important that a prudent therapist is properly armed with both concepts and is able to choose either one or the other based on how far the client already is towards regaining control of their own life.